

**DISCLOSURE SUMMARY PAGE**

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization)

21 Makes Sense

IMPORTANT: Indicate by # type of committee you are reporting for: 11

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC  
(11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Political Party (if applicable)

Office Sought

District (if Senate or House)

FORM

DR-2

(Rev. 12/2009)

DISCLOSURE  
REPORT**For Office Use Only**

Comm. # \_\_\_\_\_

Logged In \_\_\_\_\_

Scanned \_\_\_\_\_

Computer \_\_\_\_\_

Audited \_\_\_\_\_

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

SIGNATURE OF PERSON FILING REPORT

TELEPHONE

DATE SIGNED

I AM FILING A 11/22/10

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # 1☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

11/02/2010

County & Local Committees, enter County in  
which Election is held  
Johnson

**STATEMENT OF CASH ON HAND**

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 9,908.40**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

1,012.20

Schedule F: Loans Received total (Attach Schedule F)

0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0.00(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$ 10,920.60**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

10,920.60

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 0.00

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\$ 0.00

\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ 0.00 94.50

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$ 0.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0.00**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE

**A**

(Rev. 07/03)

MONETARY  
RECEIPTS☐ CHECK THIS BOX IF  
AMENDING FORM**COMMITTEE NAME** (Must be same as on Statement of Organization)

21 Makes Sense

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/23/10	ID# CK# 1009	Alex W. Debner 1285 220th St. Jessup, IA 50648		\$20.00	<input checked="" type="checkbox"/>
10/26/10	ID# CK# 6090	Paul D. Young 940 Gilbert Ct. Iowa City, IA 52240		40.00	<input checked="" type="checkbox"/>
10/27/10	ID# CK# 4033	Jodie Theobald 2330 Jessup Cir. Iowa City, IA 52246		50.00	<input checked="" type="checkbox"/>
10/24/10	ID# Pay Pal CK#	James V. Nepola 355 Butternut Lane Iowa City, IA 52246		25.00	<input checked="" type="checkbox"/>
10/25/10	ID# Pay Pal CK#	Michael O'Hara 431 Woodridge Ave. Iowa City, IA 52245		50.00	<input checked="" type="checkbox"/>
10/27/10	ID# Pay Pal CK#	Ross Wilburn 1317 Burns Ave. Iowa City, IA 52240		50.00	<input checked="" type="checkbox"/>
10/28/10	ID# Pay Pal CK#	Eleanor Dilkes 609 Kimball Rd. Iowa City, IA 52245		100.00	<input checked="" type="checkbox"/>
10/29/10	ID# PayPal CK#	Marygrace Elson 3661 Foxana Drive Iowa City, IA 52246		50.00	<input checked="" type="checkbox"/>
10/30/10	ID# CK# 1126	John Balmer 10 Princeton Ct. Iowa City, IA 52245-3630		100.00	<input checked="" type="checkbox"/>
11/1/10	ID# Pay Pal CK#	Susan Mims 1173 Oakes Dr. Iowa City, IA 52245		125.00	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 610.00

TOTAL (if last page of this schedule)

\$

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

## CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

21 Makes Sense

☐ CHECK THIS BOX IF  
AMENDING FORM

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/29/10	ID# CK#	account interest Midwest One Bank Checking account interest - Oct.		\$2.20	<input type="checkbox"/>
11/2/10	ID# CK#	Pay Pal Matthew Hayek 14 Heather Dr. Iowa City, IA 52245		100.00	<input checked="" type="checkbox"/>
11/2/10	ID# CK#	5154 Paul Burns 425 Beldon Ave. Iowa City, IA 52246		100.00	<input checked="" type="checkbox"/>
11/2/10	ID# CK#	1723 Victoria Lensing 2408 Mayfield Rd. Iowa City, IA 52246		100.00	<input checked="" type="checkbox"/>
11/2/10	ID# CK#	2970 Tom Rocklin and Kimberly Ephgrave 2 Forest Glen Iowa City, IA 52245-1625		100.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 402.20

TOTAL (if last page of this schedule)

\$ 1,012.2

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SCHEDULE

**B**

(Rev. 07/03)

MONETARY  
EXPENDITURES☐ CHECK THIS BOX IF  
AMENDING FORM**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

**COMMITTEE NAME** (Must be same as on Statement of Organization)

21 Makes Sense

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
0/29/10	ID# CK# 1017	OnMedia - IC 1150 5th St. #255 Coralville, IA 52241	TV ads	\$ 459.00
0/25/10	ID# CK#	Pay Pal	transaction fee - OHara	1.75
0/27/10	ID# CK#	Pay Pal	transaction fee - Wilburn	1.75
0/28/10	ID# CK#	Pay Pal	transaction fee - Dilkes	3.20
0/29/10	ID# CK#	Pay Pal	transaction fee - Elson	1.75
0/24/10	ID# CK#	Pay Pal	transaction fee - Nepola	1.03
1/1/10	ID# CK#	Pay Pal	transaction fee - Mims	3.93
1/2/10	ID# CK#	Pay Pal	transaction fee - Hayek	3.20
SUB-TOTAL				\$ 475.61
TOTAL (if last page of this schedule)				\$

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE

**B**

(Rev. 07/03)

MONETARY  
EXPENDITURES
☐ CHECK THIS BOX IF  
AMENDING FORM

**COMMITTEE NAME** (Must be same as on Statement of Organization)

21 Makes Sense

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
0/23/10	ID# CK# 1016	Bill Money 300 53rd St., Ste. 6 West Palm Beach, FL 33407	campaign calls #2	\$ 250.00
1/2/10	ID# CK# 1019	Iowa City Press-Citizen PO Box 957 Des Moines, IA 50304-0957	online ads Front Page label	1,949.00
0/29/10	ID# CK# 1018	Strategic Media PO Box 2817 Waterloo, IA 50704-2817	postcard #2, postage, mailing service	1,940.04
1/2/10	ID# CK# Pay Pal	Bill Money 300 53rd St., Ste. 6 West Palm Beach, FL 33407	campaign calls, #3	350.00
1/3/10	ID# CK# 1020	Westergaard Advertising 706 Court Street Adel, IA 50003	campaign management	5,000.00
1/16/10	ID# CK# 1021	Westergaard Advertising 706 Court Street Adel, IA 50003	online ads, TV production costs, printing, campaign management	955.95
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 10,444.99
TOTAL (if last page of this schedule)				\$ 10,920.60

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Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(I).)

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(for Schedule B)

**COMMITTEE NAME** (Must be same as on Statement of Organization)

21 Makes Sense

Reset Form

SCHEDULE

**E**

(Rev. 06/97)

IN-KIND  
CONTRIBUTIONS☐ CHECK THIS BOX IF  
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
11/2/10	Randy M. Larson 2208 North Dodge Street Iowa City, IA 52245-9593		election night refreshments	\$ 97.50	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 97.50	
TOTAL (if last page of this schedule)				\$ 97.50	

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.